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| United States Bankruptcy Court for the: Northern District of: Illinois (State) Case number (if known) Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 | Fill in this information to identify your case: | |
|---|---|-------------------------------|
| Case number (if known) Chapter you are filing under: Chapter 7 Chapter 11 | Northern District of: Illinois | |
| Chapter 11 | , , | Chapter you are filing under: |
| | | Chapter 11 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | f . | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | Mitchell | |
| Write the name that is on | First name | First name |
| your government-issued picture identification (for | Middle name | Middle name |
| example, your driver's | Essex | |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the | First name | First name |
| last 8 years | | |
| Include your married or maiden names. | Middle name | Middle name |
| maluer names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your | XXX - XX- 3386 | |
| digits of your Social Security number or federal | OR | OR |
| Individual Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |
| | | |

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| Debtor 1 Mitchell First Name | Middle Name | Lost Nome | Case number (if known) | | | |
|---|--------------------------------------|-------------------------------|---------------------------------------|-------------------------------|--|--|
| FIRST Name | Middle Name | Last Name | | | | |
| | About Debtor 1: | | About Debtor 2 (Spouse O | nly in a Joint Case): | | |
| 4. Any business names and Employer | I have not used any busines | s names or EINs. | I have not used any business r | names or EINs. | | |
| Identification Numbers (EIN) you have used in the | Business name | | Business name | | | |
| last 8 years | Business name | | Business name | | | |
| Include trade names and doing business as names | EIN | | EIN | | | |
| | EIN | | EIN | | | |
| 5. Where you live | CCCA C. Harritan | | If Debtor 2 lives at a different a | ddress: | | |
| | Number Street | | Number Street | | | |
| | | | | | | |
| | Chicago Illinois | 60636 | | | | |
| | City State | Zip Code | City State | Zip Code | | |
| | • | · | | _p | | |
| | Cook | | | | | |
| | County | | County | | | |
| | If your mailing address is diffe | erent from the one above, | If Debtor 2's mailing address is o | lifferent from yours, fill it | | |
| | fill it in here. Note that the court | | in here. Note that the court will sen | | | |
| | this mailing address. | | address. | , | | |
| | | | | | | |
| | Number Street | | Number Street | | | |
| | | | | | | |
| | | | | | | |
| | Cit. Chata | 7:- Cada | - - | | | |
| | City State | Zip Code | City State | Zip Code | | |
| 6. Why you are | Check one: | | Check one: | | | |
| choosing this district to file for | ✓ Over the last 180 days befo | | Over the last 180 days before | | | |
| bankruptcy | lived in this district longer th | nan in any other district. | lived in this district longer than | n in any other district. | | |
| | I have another reason. Expl | ain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain | . (See 28 U.S.C. §§ 1408.) | | |
| | | | . | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Debtor 1 Mitchell | Essex | Case number (if kno | own) |
|---|---|--|--|
| Part 2: Tell the Court Abo | Middle Name Last Name out Your Bankruptcy Case | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description of each, see Notice Requision B2010)). Also, go to the top of page 1 and check the appropriation Chapter 7 Chapter 11 Chapter 12 Chapter 13 | - | 2(b) for Individuals Filing for Bankruptcy (Form |
| 8. How you will pay the fee | ✓ I will pay the entire fee when I file my petir court for more details about how you may pay may pay with cash, cashier's check, or mone on your behalf, your attorney may pay with a I need to pay the fee in installments. If you Individuals to Pay Your Filing Fee in Installments I request that my fee be waived (You may really By law, a judge may, but is not required to, we less than 150% of the official poverty line that the fee in installments). If you choose this operation of the Chapter 7 Filing Fee Waived (Official Form 103) | y. Typically, if your a credit card or che choose this option to (Official Form 1) aive your fee, and tapplies to your fillon, you must fill | are paying the fee yourself, you attorney is submitting your payment ck with a pre-printed address. In, sign and attach the <i>Application for</i> 103A). In only if you are filing for Chapter 7. It may do so only if your income is amily size and you are unable to pay out the <i>Application to Have the</i> |
| 9. Have you filed for bankruptcy within the last 8 years? | DistrictW | nen | Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Debtor | nen MM / DD / YYYY nen MM / DD / YYYY | Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Go to line 12. Yes. Has your landlord obtained an eviction judgment ag No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction</i> this bankruptcy petition. | | |

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| Debtor 1 Mitchell | | | | Essex | Case number (if known) | | |
|--|---|--------------------|---|--|---|--|----------|
| First Name | _ | | | Last Name | | | |
| Part 3: Report About An | y Bus | inesse | es You Own as a S | sole Proprietor | | | |
| 12. Are you a sole proprietor of any full- or part-time business? | ✓ | No. Yes. | Go to Part 4. Name and location of b Name of business, if ar | | | | _ |
| A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Number City | Street | state | Zip Code | _ |
| If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | | Check the appropriate Health Care Bu Single Asset Re Stockbroker (as | box to describe your siness (as defined in eal Estate (as defined defined in 11 U.S.C. ker (as defined in 11 U | business: 11 U.S.C. § 101(27A)) I in 11 U.S.C. § 101(51B)) § 101(53A)) | p | |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). | | | | | nt of | |
| For a definition of small business debtor, see 11 U.S.C. § 101(51D). | | No. No. Yes. | Bankruptcy Code. | er 11, but I am NOT a | a small business debtor accor | rding to the definition in the other of the definition in the Bankrupt | cy Code. |
| Part 4: Report if You Ow | n or | Have A | Any Hazardous Pro | operty or Any P | roperty That Needs Im | mediate Attention | |
| 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and | ✓ □ | | What is the hazard? If immediate attention is i | needed, why is it need | ded? | | |
| identifiable hazard to public health or safety? Or do you own any property that needs | | , | Where is the property? | Number | Street | | |
| immediate attention? For example, do you | | | | | | | |
| own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | City | State | Zip Code | |

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Debtor 1 Mitchell Essex Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

credit counseling with the court.

about credit counseling, you must file a motion for waiver of

credit counseling with the court.

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| Debtor 1 Mitchell | | Ssex Case number (if k | nown) | | | |
|---|---|---|---|--|--|--|
| First Name Part 6: Answer These Ou | Middle Name Luestions for Reporting Purpos | ast Name | | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be availa No. Yes. | | ty is excluded and administrative expenses are | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 | | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| Part 7: Sign Below | | | | | | |
| For you | and correct. If I have chosen to file under C 11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me a me fill out this document, I hav I request relief in accordance of I understand making a false state. | Chapter 7, I am aware that I may properties that I may properties to Code. I understand the relies ter 7. Ind I did not pay or agree to pay so we obtained and read the notice required with the chapter of title 11, United Statement, concealing property, or of case can result in fines up to \$250, 52, 1341, 1519, and 3571. Signature Execute | states Code, specified in this petition. otaining money or property by fraud in 000, or imprisonment for up to 20 | | | |

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| Debtor 1 Mitchell | | Essex | Case number (if | f known) |
|---|--|--|--|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not | eligibility to proceed un the relief available und to the debtor(s) the no | nder Chapter 7, 11, 1 der each chapter for tice required by 11 U | 2, or 13 of title 11, Ur which the person is e l.S.C. § 342(b) and, in | nat I have informed the debtor(s) about nited States Code, and have explained ligible. I also certify that I have delivered a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the |
| need to file this page. | /s/ Sean McNulty Signature of Attorney | for Debtor | Date _ | 11/8/2016 MM / DD / YYYY |
| | Sean McNulty Printed name | | | |
| | Semrad Law Firm Firm name 11101 S. Western Ave | inue | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | Contact phone | 3128374030 | Email address | smcnulty@semradlaw.com |
| | | | Illino | is |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | | | |
|---|----------------|-------------|----------------------|--|--|--|
| Debtor 1 | Mitchell | | Essex | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing | ng) First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | | | |
| Case number (State) | | | | | | |

| Check if this is ar |
|---------------------|
| amended filing |

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$2,330.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$2,330.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$1,300.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$11,421.00 |
| Your total liabilities | \$12,721.00 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$886.32 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J | \$711.00 |
| | |

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| De | btor 1 | Mitchell | | Essex | Case n | umber (if known) | | | | |
|-------------|---|---|------------------------------|-------------------------------|--------------------|-----------------------------|------------|--|--|--|
| | | First Name | Middle Name | Last Name | | | | | | |
| Par | t 4: | Answer These Questic | ons for Administrati | ve and Statistical R | ecords | | | | | |
| 6. | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | | |
| | _ N | o. You have nothing to report | on this part of the form. Ch | eck this box and submit th | is form to the co | urt with your other schedul | es. | | | |
| | ✓ Yes. | | | | | | | | | |
| 7. \ | 7. What kind of debt do you have? | | | | | | | | | |
| | | our debts are primarily consmily, or household purpose. 1 | | | , , | , , | | | | |
| | | our debts are not primarily is form to the court with your c | | ive nothing to report on this | s part of the form | a. Check this box and subm | nit | | | |
| 8. | | the Statement of Your Cu 122A-1 Line 11; OR , Form 12 | • | 1,7,7 | nthly income fro | m Official | \$1,032.90 | | | |
| 9. | Сор | by the following special cate | egories of claims from P | art 4, line 6 of Schedule | E/F: | | | | | |
| | From | m Part 4 on Schedule E/F, c | opy the following: | | | Total claim | | | | |
| | 9a. [| Domestic support obligations | (Copy line 6a.) | | | \$0.00 | | | | |
| | 9b. 7 | Taxes and certain other debts y | you owe the government. (| Copy line 6b.) | | \$0.00 | | | | |
| | 9c. C | Claims for death or personal ir | njury while you were intoxio | cated. (Copy line 6c.) | | \$0.00 | | | | |
| | 9d. S | Student loans. (Copy line 6f.) | | | | \$0.00 | | | | |
| | | Obligations arising out of a seprity claims. (Copy line 6g.) | paration agreement or dive | orce that you did not repor | t as | \$0.00 | | | | |
| | 9f. D | Debts to pension or profit-shar | ing plans, and other simila | ar debts. (Copy line 6h.) | | \$0.00 | | | | |
| | 9g. - | Total. Add lines 9a through 9f | : | | Ī | \$0.00 | | | | |

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| | | to identity your cas | · | | Coccy | | |
|--|--|---|---|---|---|---|---|
| Debtor 1 | Mito Firs | t Name | Middle | Name | Essex Last Name | | |
| Debtor 2 | | | | | | | |
| (Spouse, | if filing) First | t Name | Middle | Name | Last Name | | |
| United St | ates Bankru | ptcy Court for the: | Northern | | District of Illinois | | |
| Cooo nun | nhor | | | | (State) | | |
| Case nun (If known) | | | | | | | |
| Officia | al Forn | n 106A/B | | | | | Check if this is an amended filing |
| Sche | dule A | VB: Prope | erty | | | | 12/ |
| category v responsib write your Part 1: | where you oble for support name and Describe | think it fits best. B olying correct info case number (if k Each Resider | e as complete ai rmation. If more nown). Answer e nce, Building, | nd accurat space is r very quest Land, c | only once. If an asset fits in more than the as possible. If two married people at needed, attach a separate sheet to this tion. or Other Real Estate You Own of dence, building, land, or similar prope | re filing together, both are s form. On the top of any a or Have an Interest In | equally dditional pages, |
| 1. Do you | No. Go to | , , | juitable interest i | n any resi | dence, building, land, or similar prope | rty ? | |
| H | | e is the property? | | | | | |
| 1.1 | | ress, if available, or | other description | Sing | s the property? Check all that apply. gle-family home llex or multi-unit building | the amount of any secure Creditors Who Have Cla | laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. |
| | | | | Mar | dominium or cooperative nufactured or mobile home | Current value of the entire property? | Current value of the portion you own? |
| | Number | Street | | | stment property eshare | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | City | State | Zip Code | Who has one. Deb Deb Deb | as an interest in the property? Check stor 1 only stor 2 only stor 1 and Debtor 2 only east one of the debtors and another | Check if this is co (see instructions) | mmunity property |
| lf vou | own or have | more than one, list | here: | Other in | nformation you wish to add about this y identification number: | item, such as local | |
| 1.2 | | ress, if available, or | | Sing Dup Con Mar | s the property? Check all that apply. gle-family home elex or multi-unit building dominium or cooperative hufactured or mobile home | the amount of any secure | laims or exemptions. Put ed claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| | Number | Street | Zip Code | | stment property eshare | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | Oity | State | Zip Gode | Who hat one. Debtor Debtor Debtor At let | as an interest in the property? Check stor 1 only stor 2 only stor 1 and Debtor 2 only sast one of the debtors and another information you wish to add about this | (see instructions) | mmunity property |

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| Debtor 1 | Mitchell First Name | Middle Name | Essex Last Name | Case number | (if known) | _ |
|-----------------------|---|---|--|------------------------------|--|--|
| 1.3Sti | reet address, if available, or ot | | What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | ply. | Do not deduct secured of the amount of any secure Creditors Who Have Clate Current value of the entire property? | · · |
| Nu Ci | mber Street ty State | Zip Code | Land Investment property Timeshare Other | | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | | | Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about | r | Check if this is con (see instructions) | mmunity property |
| | - | tion you own for | property identification number: all of your entries from Part 1, includir ere | | | |
| you own 3. Cars, v | | equitable interest u lease a vehicle, a | in any vehicles, whether they are regis lso report it on Schedule G: Executory Con cycles | | | |
| 3.1 | Model: | Chevrolet Monte Carlo | Who has an interest in the proper one. Debtor 1 only | ty? Check | the amount of any secure | laims or exemptions. Put ed claims on Schedule D: aims Secured by Property. |
| | Year: Approximate mileage: Other information: | <u>150000</u> | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an Check if this is community proinstructions) | | Current value of the entire property? \$1550.00 | Current value of the portion you own? \$1550.00 |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | <u></u> | Who has an interest in the proper one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | other | the amount of any secure | laims or exemptions. Put ad claims on Schedule D: hims Secured by Property. Current value of the portion you own? |
| | | | Check if this is community pro instructions) | ρ με ττ y (see | | |

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| Debtor 1 | Mitchell | Essex | Case number (if known) | |
|----------|---------------------------------------|---|------------------------------------|------------------------------------|
| | First Name Mic | ddle Name Last Name | | |
| 3.3 | Make | Who has an interest in the pro | • | ed claims or exemptions. Put |
| | Model: | one. | • | cured claims on Schedule D: |
| | Year: | Debtor 1 only | Creditors Who Have | Claims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | Current value of th | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and | d another | |
| | | Check if this is community instructions) | property (see | |
| 3.4 | | Who has an interest in the pro | | ed claims or exemptions. Put |
| | Model: | one. | • | cured claims on Schedule D: |
| | Year: | Debtor 1 only | Creditors Who Have | Claims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | Current value of th | e Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and | d another ———— | |
| | | Check if this is community instructions) | property (see | |
| └ | Yes Make | Who has an interest in the pro | pperty? Check Do not deduct secure | ed claims or exemptions. Put |
| 4.1 | Model: | one. | | cured claims on <i>Schedule D:</i> |
| | Year: | Debtor 1 only | | Claims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | Current value of the | e Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and | d another | |
| | | Check if this is community | property (see | |
| | | instructions) | | |
| 4.2 | Make | Who has an interest in the pro | operty? Check Do not deduct secure | ed claims or exemptions. Put |
| | Model: | one. | | cured claims on Schedule D: |
| | Year: | Debtor 1 only | Creditors Who Have | Claims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | Current value of th | e Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and | d another | |
| | | Check if this is community instructions) | r property (see | |
| | | u own for all of your entries from Part 2, incl | | \$1550.00 |
| vou ha | ive attached for Part 2. Write that r | number here | > | T |

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Debtor 1 Mitchell Case number (if known) First Name Middle Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$125.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **√** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **√** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **√** No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ✓ Yes. Describe... **Used Clothing** \$225.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □l No Yes. Describe... Misc. Jewelry \$50.00 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **√** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$750.00 for Part 3. Write that number here

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| Deb | tor 1 | Mitchell | | Essex | Case number (if known) | |
|------|-------|---|---|---|---------------------------------|--|
| | | First Name | Middle Name | Last Name | | |
| Part | | | Financial Assets any legal or equitable int | erest in any of the follow | ving? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | No | | safe deposit box, and on hand who | en you file your petition | |
| | ✓ | Yes | | | Cash: | \$30.00 |
| 17. | Exar | | | s; certificates of deposit; shares in ounts with the same institution, list Institution name: | | |
| | | | 17.1. Checking account: | | | |
| | | | 17.2. Checking account: | | | |
| | | | 17.3. Savings account: | | | |
| | | | 17.4. Savings account: | | | |
| | | | 17.5. Certificates of deposit: | | | |
| | | | 17.6. Other financial account: | | | |
| | | | 17.7. Other financial account: | - | | - |
| | | | 17.8. Other financial account: | | | - |
| | | | 17.9. Other financial account: | | | |
| 18. | | | or publicly traded stocks nvestment accounts with brokerag | ge firms, money market accounts | | - |
| | ✓ | No Yes | Institution or issuer name: | | | |
| | | | | | | |
| 19. | an L | | tock and interests in incorpora and joint venture | ated and unincorporated busin | esses, including an interest in | |
| | | Yes. Give specific information about them | Name of entity | | % of ownership: | |
| | | | | | | |

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| Debt | tor 1 | Mitchell | | Essex | Case number (if known) | _ |
|------|----------|--------------------------|--|--|---------------------------------|---|
| | | First Name | Middle Name | Last Name | | |
| 20. | | | orate bonds and other negotial | | | |
| | | | nclude personal checks, cashiers' o | | | |
| | Nor | n-negotiable instrume | nts are those you cannot transfer to | o someone by signing or delivering | ng them. | |
| | ✓ | No | | | | |
| | | Yes. Give specific | | | | |
| | | information about | Issuer name: | | | |
| | | them | | | | |
| | | | | | | |
| | | | | | | - |
| | | | | | | |
| 21. | Ret | rirement or pension | accounts | | | |
| | Exa | amples: Interests in IR | A, ERISA, Keogh, 401(k), 403(b), | thrift savings accounts, or other | pension or profit-sharing plans | |
| | ✓ | No | | | | |
| | | Yes. List each | Type of account: | Institution name: | | |
| | | account separately. | 401(k) or similar plan: | | | |
| | | | Pension plan: | | | |
| | | | IRA: | | | |
| | | | Retirement account: | | | |
| | | | Keogh: | | | |
| | | | Additional account: | | | |
| | | | Additional account: | - | | |
| | | | | | | |
| 22. | | curity deposits and p | | | | |
| | You | ir share of all unused o | deposits you have made so that you with landlords, prepaid rent, public | may continue service or use from | n a company | |
| | | npanies, or others | with landiolas, propaid fort, public | dillilos (cicotrio, gas, water), tere | Scottiffdifications | |
| | V | No | | Institution name: | | |
| | Ħ | Yes | Florida | | | |
| | ш | 103 | Electric: | | | |
| | | | Gas: | - | | |
| | | | Heating oil: | | | |
| | | | Security deposit on rental unit: | | | |
| | | | Prepaid rent: | | | - |
| | | | Telephone: | | | |
| | | | Water: | | | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| 23. | Anr | nuities (A contract for | a periodic payment of money to yo | ou, either for life or for a number of | of years) | |
| | ✓ | No | | | | |
| | П | Yes | Issuer name and description: | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Debt | or 1 Mitchell First Name | Middle | e Name | Essex Last Name | Case number (if known) | |
|------|----------------------------------|--|---|------------------------------|--|--|
| 24. | Interests in a | n education IRA, in an ac | count in a qualifie | | der a qualified state tuition program | - |
| | _ | 530(b)(1), 529A(b), and 529 | (b)(1). | | | |
| | ✓ No Yes | Institution name and descri | otion. Separately file | e the records of any interes | sts.11 U.S.C. § 521(c): | |
| | | | | | | |
| | | | | | | |
| 25. | | able or future interests in or your benefit | property (other th | nan anything listed in lir | ne 1), and rights or powers | |
| | ✓ No | | | | | _ |
| | Yes. Desc | cribe | | | | |
| 26. | | rights, trademarks, trade rnet domain names, website | | | ements | |
| | ✓ No | , | , | ., | | |
| | Yes. Desc | cribe | | | | |
| | | | | | | 1 |
| 27. | | nchises, and other general ding permits, exclusive lice | | association holdings, liquo | r licenses, professional licenses | |
| | ✓ No | | | | | |
| | Yes. Desc | cribe | | | | |
| Mar | | orty awad to you? | | | | Current value of the |
| WOr | iey or prope | erty owed to you? | | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds o | wed to you | | | | dains of exemptions. |
| | ✓ No | | | | | |
| | | specific information t them, including whether | | | Federal: | \$0.00 |
| | you a | already filed the returns | | | State: | \$0.00 |
| | | he tax years | | | Local: | \$0.00 |
| | Family support Examples: Past | | pousal support, chil | d support, maintenance, d | ivorce settlement, property settlement | |
| | ✓ No | | | | | |
| | Yes. Give | specific information | | | Alimony: | \$0.00 |
| | | | | | Maintenance: | \$0.00 |
| | | | | | Support: | \$0.00 |
| | | | | | Divorce settlement: | \$0.00 |
| 0.0 | - · | | | | Property settlement: | \$0.00 |
| 30. | Examples: Unp | s someone owes you aid wages, disability insuran ial Security benefits; unpaid | | | ation pay, workers' compensation, | |
| | ✓ No | , 22 | , | | | |
| | Yes. Desci | ribe | | | | |
| | | | | | | |

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| Deb | tor 1 Mitchell | Essex | Case number (if known) | |
|------|---|--|---|--|
| | First Name Middle Name | Last Name | | _ |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; he | alth savings account (HSA); credit, ho | nmeowner's, or renter's insurance | |
| | Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died. | | or are currently entitled to receive | |
| | ✓ No Yes. Describe | | | |
| 33. | Claims against third parties, whether or not Examples: Accidents, employment disputes, insu | | demand for payment | |
| | ✓ No Yes. Describe | | | |
| 34. | Other contingent and unliquidated claims of to set off claims | f every nature, including counterc | laims of the debtor and rights | |
| | ✓ No Yes. Describe | | | |
| 35. | Any financial assets you did not already list | | | |
| | ✓ No Yes. Describe | | | |
| 36. | Add the dollar value of all of your entries fro for Part 4. Write that number here | | | \$30.00 |
| | December Asses Business Bulleted | Daniela Van Oura de Hana | | in Bout 4 |
| Part | | | n Interest In. List any real estate | in Part 1. |
| 37. | Do you own or have any legal or equitable in | terest in any business-related prop | | |
| | No. Go to Part 6. Yes. Go to line 38. | | p | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or commissions you alr | eady earned | | |
| | Yes. Describe | | | |
| 39. | Office equipment, furnishings, and supplies Examples: Business-related computers, software | | nines, rugs, telephones, desks, chairs, electro | nic devices |
| | ✓ No Yes. Describe | | | |
| | | | | |

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| Deb | tor 1 Mitchell | AP 1 2 2 2 | Essex | Case number (if known) | |
|-----|---------------------------------------|--|------------------------------|---------------------------------------|---|
| 40. | First Name | Middle Name quipment, supplies you use in b | Last Name | ur trade | |
| 40. | | juipinent, supplies you use in bi | usiness, and tools of yo | ui traue | |
| | ✓ No Yes. Describe | | | | |
| | Teo. Describe | | | | |
| | | | | | |
| 41. | Inventory | | | | |
| | ✓ No | | | | 1 |
| | Yes. Describe | | | | |
| | | | | | 1 |
| 42. | Interests in partnersh | ips or joint ventures | | | |
| | ✓ No | Name of | f ontity: | % of ownership: | |
| | Yes. Give specific | Name of | r Criuty. | 70 Of Ownership. | |
| | information about them | | | · · · · · · · · · · · · · · · · · · · | _ |
| | | | | | |
| | | | | | |
| 43. | Customer lists, mailing | lists, or other compilations | | | |
| | ✓ No | | | | |
| | Yes. Do your lists in | clude personally identifiable inform | nation (as defined in 11 U.S | S.C. § 101(41A))? | |
| | □ No | | | | |
| | Yes. Desc | ribe | | | |
| 44 | Amy hysiness related | arenents, very did not already list | | | |
| 44. | | property you did not already list | | | |
| | ✓ No | | | | <u> </u> |
| | Yes. Give specific information | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | III of your entries from Part 5, inc | | | |
| | | | | | L |
| Par | | rarm- and Commercial FIS n interest in farmland, list it in Part 1. | | rty You Own or Have an Interest | in. |
| 46. | Do you own or have a | ny legal or equitable interest in | any farm- or commercia | I fishing-related property? | |
| | No. Go to Part 7. | | | - | Current value of the |
| | Yes. Go to line 47. | | | | portion you own? Do not deduct secured |
| | _ | | | | claims |
| 4- | F | | | | or exemptions |
| 47. | Farm animals Examples: Livestock, po | ultry, farm-raised fish | | | |
| | ✓ No | • | | | |
| | Yes. Describe | | | | |
| | .55. 25001100 | | | | |
| | | | | | |

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| Debte | or 1 | Mitchell | Middle Nesse | Essex | Case number (if known) | |
|----------------|----------|----------------------------------|--|--------------------------|------------------------------|-------------|
| 18 | Cro | First Name ps-either growing or | Middle Name | Last Name | | |
| 48. | _ | | naivesteu | | | |
| | 넴 | No Yaa Daaariba | | | | |
| | ш | Yes. Describe | | | | |
| | - | | | | | |
| 49. | Far | m and fishing equipr | nent, implements, machinery, fixtu | ires, and tools of trade | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | _ | | | | | |
| 50. | Far | m and fishing supplie | es, chemicals, and feed | | | |
| | V | No | | | | |
| | 靣 | Yes. Describe | | | | |
| | | | | | | |
| 51. | Anv | / farm- and commerci | ial fishing-related property you did | I not already list | | |
| • | V | No | g,,,, | | | |
| | H | Yes. Describe | | | | |
| | ш | | | | | |
| | - | | | | Г | |
| | | | of your entries from Part 6, includi | | | |
| for Pa | art 6. | Write that number he | ere | | | |
| | | | | | | |
| | | | | | | |
| Part i | | | perty You Own or Have an I | | Did Not List Above | |
| | | | rty of any kind you did not already country club membership | / list ? | | |
| | ✓ | No | | | | |
| | П | Yes. Give specific | | | | |
| | | information | | | | |
| | | | | | | |
| | | | | | | |
| 54. Ac | dd th | ne dollar value of all o | f your entries from Part 7. Write th | nat number here | > | |
| | | | | | | |
| | | | | | | |
| Part 8 | 8: | List the Totals of | Each Part of this Form | | | |
| 55 P | art 1 | l: Total real estate lin | e 2 | | • | |
| 00.1 | u. c | r. rotarroar ostato, iii | | | | |
| 56. p | art 2 | total vehicles, line 5 | | \$1550.00 | | |
| 57. P a | art 3 | : Total personal and | household items, line 15 | \$750.00 | _ | |
| 58. P a | art 4 | : Total financial asset | s, line 36 | · | _ | |
| | | 5: Total business-rela | | \$30.00 | _ | |
| | | | | | - | |
| | | | ning-related property, line 52 | | _ | |
| 61. P | art 7 | 7: Total other propert | y not listed, line 54 | | | |
| 62. T | otal | personal property. A | dd lines 56 through 61 | \$2330.00 | | + \$2330.00 |
| | | | | | Copy personal property total | |
| | | | | | | \$2330.00 |
| | | | | | | |

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| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Mitchell | | Essex | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if fili | ng) First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (State) | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | t 1: Identify the Property You Cla | im as Exempt | | | | | | |
|----------|---|---|---|------------------------------------|--|--|--|--|
| 1. 2. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | |
| | Brief description: Misc. Household Goods Line from Schedule A/B: 06 | \$350.00 | \$350.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | | |
| | Brief description: Misc. Jewelry Line from Schedule A/B: 12 | \$50.00 | \$50.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No No No Yes. Did you acquire the property covered Yes | 3 years after that for ca | | | | | | |

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| Debtor 1 Mitchell | | | Essex | Case number (if known) | |
|---|------------|--------------------------------------|--------------|---|--|
| First Name | Middle N | ame | Last Name | | |
| Part 2: Additional Page | | | | | |
| Brief description of the p line on Schedule A/B that property | lists this | Current value of the portion you own | | e exemption you claim e box for each exemption. | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | | | |
| Brief | | | | | 735 ILCS 5/12-1001(b) |
| description: | | \$125.00 | \checkmark | \$125.00 | |
| Misc. Electronics Line from Schedule A/B: 07 | | | | air market value, up to any statutory limit | _ |
| Brief | | | | | 735 ILCS 5/12-1001(a) |
| description: | | \$225.00 | \checkmark | \$225.00 | |
| Used Clothing Line from Schedule A/B: 11 | | | | air market value, up to any statutory limit | _ |
| Brief | | | | | 735 ILCS 5/12-1001(b) |
| description: | | \$30.00 | \checkmark | \$30.00 | |
| Cash on Hand Line from | <u></u> | | | air market value, up to any | _ |
| Schedule A/B: 16 | | | applicable | statutory limit | |
| Brief description: | | \$1,550.00 | V | \$250.00 | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |
| Chevrolet Monte Car 2004 | io, | | | air market value, up to any | _ |
| Line from Schedule A/B: 03 | | | аррисавіе | s statutory IIIIIII | |

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| | | | | <u> </u> | | | |
|-----------|-------------------------------------|--|---|---|---|---|---------------------------------------|
| Fill in t | his inform | ation to identify your case | : | | | | |
| Debto | r 1 | Mitchell | | Essex | | | |
| | | First Name | Middle Name | Last Name | | | |
| Debto | | \ - | | | | | |
| (Spous | se, if filing | First Name | Middle Name | Last Name | | | |
| United | States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | |
| Cooo | number | | | (State) | | | |
| (If know | | _ | | | | | |
| Offi | cial F | Form 106D | | | L | | Check if this is ar amended filing |
| Sch | nedu | le D: Credit | ors Who Ha | ve Claims Secur | ed by Pro | perty | 12/1 |
| Part 1 2. | No. Cheller Yes. Figure List All Se | ill in all of the information ball Secured Claims cured claims. If a credito | nis form to the court with you pelow. In has more than one secure. | our other schedules. You have nothing red claim, list the creditor separately n, list the other creditors in Part 2. As | else to report on this f Column A Amount of claim | orm. Column B Value of | Column C Unsecured |
| ı | much as p | possible, list the claims in a | alphabetical order accordi | ng to the creditor's name. | Do not deduct the value of collateral. | collateral that supports this claim | portion If any |
| | USA Payo | , | Describe the property | that secures the claim: | \$1,300.00 | \$1,550.00 | \$0.00 |
| | Creditor's 1541 N L | | Chevrolet Monte Carlo | | | | |
| • | Numbe | er Street | | the claim is: Check all that apply. | | | |
| | | | Contingent | | | | |
| | Waukega City | an Illinois 60085 State ZIP Code | Unliquidated | | | | |
| | | es the debt? Check one. | Disputed | all that apply | | | |
| | _ | or 1 only | Nature of lien. Check a | made (such as mortgage or secured | | | |
| | | or 2 only or 1 and Debtor 2 only | car loan) | nade (such as mortgage of secured | | | |
| | | ast one of the debtors and | Statutory lien (such | as tax lien, mechanic's lien) | | | |
| | anoth | er | Judgment lien from | | | | |
| | | k if this claim relates community debt | Other (including a ri | ght to offset) | | | |
| | Date debincurred | | Last 4 digits of account | nt number | | | |
| | | Add the dollar value of y | your entries in Column | A on this page. Write that | \$1,300.00 | | |

number here:

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| Fill | in this inform | nation to identify your cas | se: | | | | | |
|--|--|---|--|--|---|---------------|--------------------|--------------------|
| Deb | otor 1 | Mitchell | | Essex | | | | |
| | | First Name | Middle Name | Last Name | _ | | | |
| | otor 2 | \ = | | | _ | | | |
| (Spo | ouse, it tiling |) First Name | Middle Name | Last Name | | | | |
| Unit | ted States B | ankruptcy Court for the: | Northern | District of Illinois | _ | | | |
| Coo | se number | | | (State) | | | | |
| | nown) | | | | _ | | | |
| Off | ficial F | orm 106E/F | | | | Пcr | neck if this is ar | n amended filing |
| | | | | | | | | 9 |
| Sc | chedu | ile E/F: Cre | editors Who | Have Unsecu | red Claims | | | 12/15 |
| party 106A that entri knov | Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims | | | | | | | |
| 1. | Do any cr | editors have priority ur | nsecured claims against ye | ou? | | | | |
| | _ | o to Part 2. | , | | | | | |
| | Yes. | | | | | | | |
| 2. | List all of listed, iden much as p Continuation | tify what type of claim it is ossible, list the claims in on Page of Part 1. If mor | s. If a claim has both priority a alphabetical order according e than one creditor holds a p | ore than one priority unsecured and nonpriority amounts, list that to the creditor's name. If you ha particular claim, list the other cre or this form in the instruction bool | claim here and show both ave more than two priority ditors in Part 3. | n priority an | d nonpriority a | mounts. As |
| | | | | | | Total claim | Priority amount | Nonpriority amount |

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| Debto | or 1 Mitchell Ess | |
|--------|--|---|
| | First Name Middle Name Last | Name |
| Part 2 | List All of Your NONPRIORITY Unsecured Claims | |
| 3. | Do any creditors have nonpriority unsecured claims against you | ? |
| j. i | No. You have nothing to report in this part. Submit this form to the | |
| | Yes. | odit with your other soriodalics. |
| | | |
| | | order of the creditor who holds each claim. If a creditor has more than one priority |
| | | claim listed, identify what type of claim it is. Do not list claims already included in Part 1. s in Part 3.If you have more than four priority unsecured claims fill out the Continuation |
| | Page of Part 2. | s in the direction that hour phoney discourse dains in out the continuation |
| - | | Total claim |
| 44 | AENILING | |
| 4.1 | AFNI, INC. Nonpriority Creditor's Name | Last 4 digits of account number 2073 \$1,359.00 |
| | PO Box 3517 | When was the debt incurred? 8/1/2016 |
| | Number Street | As of the date you file the claim is: Check all that apply |
| | | As of the date you file, the claim is: Check all that apply. |
| | Bloomington Illinois 61702 | Contingent |
| | City State Zip Code | Unliquidated |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed |
| | | Type of NONPRIORITY unsecured claim: |
| | Debtor 2 only | Student loans |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce |
| | At least one of the debtors and another | that you did not report as priority claims |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar |
| | Is the claim subject to offset? | debts |
| | ✓ No | ✓ 001 Collection; Collecting for ORIGINAL CREDITOR: AT T |
| | Yes | Other. Specify MOBILITY |
| | | <u> </u> |
| 4.2 | CHASE CARD Nonpriority Creditor's Name | Last 4 digits of account number 6965 \$508.00 |
| | PO BOX 15298 | When was the debt incurred? 10/1/2013 |
| | Number Street | As of the date you file, the claim is: Check all that apply. |
| | | Contingent |
| | WILMINGTON Delaware 19850 | |
| | City State Zip Code | Unliquidated |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Disputed |
| | | Type of NONPRIORITY unsecured claim: |
| | Debtor 2 only | Student loans |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce |
| | At least one of the debtors and another | that you did not report as priority claims |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts |
| | Is the claim subject to offset? | ✓ Other. Specify CreditCard |
| | <u>✓</u> No | <u> </u> |
| | Yes | |
| 4.3 | City of Chicago Parking | Last 4 digits of account number \$3,100.00 |
| | Nonpriority Creditor's Name 121 N. LaSalle St # 107A | When was the debt incurred? n/a |
| | Number Street | |
| | | As of the date you file, the claim is: Check all that apply. |
| | | Contingent |
| | Chicago Illinois 60602 | Unliquidated |
| | City State Zip Code | Disputed |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: |
| | | Student loans |
| | Debtor 2 only | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar |
| | Check if this claim relates to a community debt | debts |
| | Is the claim subject to offset? | Other. Specify Parking Tickets |
| | ✓ No | |
| | Yes | |

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Debtor 1 Mitchell Essex Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 \$600.00 Comcast Last 4 digits of account number _ Nonpriority Creditor's Name 11621 E. Marginal Way # 5 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Bankruptcy Dept Contingent Unliquidated Washington ... 98168 Seattle City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify_ Cable Bills Is the claim subject to offset? **✓** No Yes DEPT OF EDUCATION/NELN \$1,806.00 Last 4 digits of account number 7392 Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 12/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent LINCOLN Nebraska 68508 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify **✓** No Yes **DEPT OF EDUCATION/NELN** \$1,287.00 Last 4 digits of account number Nonpriority Creditor's Name 121 S 13TH ST When was the debt incurred? 12/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent 68508 LINCOLN Nebraska Unliquidated Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify **✓** No

Yes

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Debtor 1 Mitchell Essex Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DISCOVER FIN SVCS LLC 4.7 \$863.00 Last 4 digits of account number Nonpriority Creditor's Name PO <u>BOX 15316</u> When was the debt incurred? 11/1/2013 Number As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON 19850 Delaware Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify **✓** No Yes ENHANCED RECOVERY CO L 4.8 \$1,914.00 Last 4 digits of account number 7204 Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 10/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: SPRINT **✓** No Yes **FST PREMIER** 4.9 \$572.00 Last 4 digits of account number Nonpriority Creditor's Name 3820 N LOUISE AVE When was the debt incurred? 12/1/2013 Number As of the date you file, the claim is: Check all that apply. Contingent SIOUX FALLS South Dakota 57107 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify _ **✓** No

Yes

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Debtor 1 Mitchell Essex Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Illinois Tollway \$100.00 Last 4 digits of account number Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Unliquidated Downers Grove Illinois 60515 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify _ **Tollway Violations** Is the claim subject to offset? **✓** No Yes 4.11 PLS Financial \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 177 W. Lake St. When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60601 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify _ Payday Loans Is the claim subject to offset? **✓** No Yes 4.12 Santander Consumer USA \$1,905.00 Last 4 digits of account number 1000 Nonpriority Creditor's Name PO Box 961245 When was the debt incurred? 11/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent 76161 Fort Worth Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify 049 Automobile **✓** No

☐ Yes

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Debtor 1 Mitchell Essex Case number (if known) First Name Middle Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$3,093.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$11,421.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

\$14,514.00

6j. Total. Add lines 6f through 6i.

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| Fill in this infor | mation to identify your cas | e: | | | |
|------------------------|-------------------------------|--------------------------------|---------------------------------|---|------------------------------------|
| Debtor 1 | Mitchell | | Essex | | |
| | First Name | Middle Name | Last Name | _ | |
| Debtor 2 | | | | | |
| (Spouse, if filin | g) First Name | Middle Name | Last Name | _ | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| | | | (State) | _ | |
| Case number (If known) | | | | <u> </u> | |
| | Form 106G le G: Execut | | s and Unexpire | ed Leases | Check if this is an amended filing |
| | ed, copy the additional p | | | e equally responsible for supplying correction is page. On the top of any additional page | |
| 1. Do you h | nave any executory | contracts or unexpi | red leases? | | |
| ✓ No. Ch | eck this box and file this fo | orm with the court with your o | other schedules. You have noth | ning else to report on this form. | |
| Yes. Fil | I in all of the information b | elow even if the contracts o | r leases are listed on Schedule | e A/B: Property (Official Form 106A/B). | |
| | | | | en state what each contract or lease is for (| |

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| Fill in this in | formation to identify your | case: | | |
|------------------------|---|--------------------------------------|-----------------------------|--|
| Debtor 1 | Mitchell | | Essex | |
| Dobtor 1 | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if f | First Name | Middle Name | Last Name | |
| United State | es Bankruptcy Court for the | e: Northern | District of Illinois(State) | |
| Case number (If known) | er | | (Ciaio) | |
| | | | | Check if this is an amended filing |
| Officia | I Form 106H | 1 | | |
| Sched | ule H: Your | _ Codebtors | | 12/15 |
| 1. Do you | • | If you are filing a joint case, do | not list either spouse as a | codebtor.) |
| ldaho, L ✓ N | Louisiana, Nevada, New Moo. Go to line 3. | lexico, Puerto Rico, Texas, Wa | shington, and Wisconsin.) | (Community property states and territories include Arizona, California, |
| | | er spouse, or legal equivalent li | ve with you at the time? | |
| | • | ity state or territory did you live? | ?Fil | ill in the name and current address of that person. |
| | Name of your spous | e, former spouse, or legal equiv | valent | |
| | Number Street | | | |
| | City | State | Zip Coo | de |
| again a | s a codebtor only if that | t person is a guarantor or co | osigner. Make sure you h | if your spouse is filing with you. List the person shown in line 2 have listed the creditor on Schedule D (Official Form 106D), edule D, Schedule E/F, or Schedule G to fill out Column 2. |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

Column 1: Your codebtor

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| Fill in this | s information to identif | y your case: | | | | | | |
|---------------------------|--|---|---------------------------------|-------------------|--------------------|-----------------------------------|--|-----------|
| Debtor 1 | Mitchell | | Essex | | _ | | | |
| | First Name | Middle Name | Last Nar | me | | Check if this is: | | |
| Debtor 2 (Spouse, if t | filing) First Name | Middle Name | Last Nar | me | _ | An amended filing | • | |
| (000000) | ······9/ FIISt Name | Middle Name | Lasi Nai | ile | | | • | bootor 10 |
| United State | es Bankruptcy Court for the: | Northern | District of Illing | | _ | expenses as of th | owing post-petition c e following date: | париетта |
| Case numb | er | | (Sta | ale) | | | | |
| (If known) | | | | | | MM / DD / YYYY | | |
| Officia | l Form 106I | | | | | | | |
| Sched | lule I: Your Ind | come | | | | | | 12/15 |
| additiona | | r spouse. If more spa ame and case number | | | | | | |
| | Fill in your employment | | Debtor 1 | | | Debtor 2 | | |
| İ | information. | Employment status | ✓ Employe | d | | Employed | | |
| | If you have more than one | | Not Employed | | Not Employed | | | |
| | job, attach a separate page with | | | loyou | | Ttot Employee | | |
| | information about additional | Occupation | - | | | _ | | |
| ' | employers. | Employer's name | State of Illino | ois - Leslie Gei | ssler Munger | | | |
| | Include part time, seasonal, or | Employer's address | 325 W Adams St Number Street | | _ | | | |
| | self-employed work. | | | | Number Street | | | |
| | Occupation may include | | | | | _ | | |
| ; | student | | | | | | | |
| • | or homemaker, if it applies. | | Springfield | Illinois | 62704 | - | | |
| | | | City | State | Zip Code | City | State Zip Code | 9 |
| | | How long employed there? | | | | | | |
| Part 2: | Give Details About | Monthly Income | | | | | | |
| | | | | | | | | |
| Estimate you are se | | date you file this form. If yo | ou have nothing to | o report for any | line, write \$0 in | the space. Include you | ır non-filing spouse | unless |
| | our non-filing spouse have mo eparate sheet to this form. | ore than one employer, combi | ne the information | n for all employe | ers for that perso | on on the lines below. It | you need more spa | ice, |
| | | | | For D | ebtor 1 | For Debtor 2 or non-filing spouse | , | |
| | | ry, and commissions (befor alculate what the monthly wag | | 2. | \$1,180.00 | | | |
| 3. Estin | mate and list monthly over | time nav | .9 | 3 | + \$0.00 | | | |

Official Form 106I Schedule I: Your Income page 1

\$1,180.00

4. Calculate gross income. Add line 2 + line 3.

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| Debloi | First Name | Middle Name | Last Name | Case number | (if known) | |
|-----------------------|--|---|--------------|--------------|-----------------------------------|-------------------------|
| | Filst Name | Middle Name | Last Name | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Сор | y line 4 here | | → 4. | \$1,180.00 | | |
| 5. List | all payroll deductio | | | | | |
| 5a. | Tax, Medicare, and | Social Security deductions | 5a. | \$244.74 | | |
| 5b. | Mandatory contribu | utions for retirement plans | 5b. | \$0.00 | | |
| 5c. | Voluntary contribut | tions for retirement plans | 5c. | \$0.00 | | |
| 5d. | Required repaymer | nts of retirement fund loans | 5d. | \$0.00 | | |
| 5e. | Insurance | | 5e. | \$0.00 | | |
| 5f. [| Domestic support o | bbligations | 5f. | \$0.00 | | |
| 5g. | Union dues | | 5g. | \$48.94 | | |
| 5h. | Other deductions. | Specify: | 5h. + | \$0.00 + | | |
| 6. Add +5h. | the payroll deducti | ons. Add lines 5a + 5b + 5c + 5d + 5e +5 | if + 5g 6. | \$293.68 | | |
| 7. Calc | culate total monthly | take-home pay. Subtract line 6 from line | 4. 7. | \$886.32 | | |
| 8. List | all other income req | gularly received: | | | | |
| | business, profession | • | | | | |
| | | r each property and business showing gro I necessary business expenses, and the to | | \$0.00 | | |
| 8b. | Interest and divide | nds | 8b. | \$0.00 | | |
| | Family support pay dependent regularly | ments that you, a non-filing spouse, o y receive | or a | | | |
| | divorce settlement, ar | sal support, child support, maintenance, nd property settlement. | 8c. | \$0.00 | | |
| | Unemployment cor | npensation | 8d. | \$0.00 | | |
| 8e. | Social Security | | 8e. | \$0.00 | | |
| | nclude cash assistand assistance that you re the Supplemental Nut subsidies | essistance that you regularly receive be and the value (if known) of any non-cast ceive, such as food stamps (benefits unde trition Assistance Program) or housing | er | \$0.00 | | |
| | Specify: Pension or retirem | ent income | 8f. 8g. | \$0.00 | | |
| ŭ | | me. Specify: | _ | \$0.00 + | | |
| | - | • • | | \$0.00 | | |
| 9. Add | an other income Ac | dd lines 8a + 8b + 8c + 8d + 8e + 8f +8g + | - 8h. 9. | φ0.00 | | |
| | | me. Add line 7 + line 9. I for Debtor 1 and Debtor 2 or non-filing sp | 10. Douse | \$886.32 | | = \$886.32 |
| Incl rela | 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. | | | | | |
| Spe | ecify: | | | | | 11. + \$0.00 |
| | | last column of line 10 to the amount Summary of Schedules and Statistical Sui | | | | 12. \$886.32 |
| | | | | | | Combined monthly income |
| 13. Do | 13. Do you expect an increase or decrease within the year after you file this form? No. | | | | | |
| | Yes. Explain: | | | | | |
| _ | J 130. Explain. | | | | | |
| | 1 | | | | | |

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| Fill in this information | to identify your cas | se: | | | | |
|--|------------------------------------|--|--|-------------------|--|------------|
| Debtor 1 Mitcl | hell | | Essex | | | |
| | Name | Middle Name | Last Name | | | |
| Debtor 2 | | | _ | Check if this is: | | |
| (Spouse, if filing) First | Name | Middle Name | Last Name | An amended filing | Į | |
| United States Bankrup | otcy Court for the: | Northern | District of Illinois (State) | A supplement sho | owing post-petition of the control o | chapter 13 |
| Case number | | | | • | o o | |
| (If known) | | | | MM / DD / YYYY | | |
| Official For | m 106J | | | | | |
| Schedule J | - | openses | | | | 12/1 |
| | space is needed, very question. | attach another sheet to this f | e filing together, both are equally form. On the top of any addition | | | ber |
| 1. Is this a joint case | | | | | | |
| ✓ No. Go to line | | | | | | |
| Yes. Does De | ebtor 2 live in a se | eparate household? | | | | |
| No | | | | | | |
| Yes | . Debtor 2 must file | e Official Forms 106J-2, Expens | ses for Separate Household of Deb | otor 2. | | |
| 2. Do you have dependents? | ✓ N | 0 | | | | |
| Do not list Debtor 1 Debtor 2. | | es. Fill out this information for ach dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depender with you? | nt live |
| 3. Do your expenses expenses of peop | A N | 0 | | | | |
| than yourself and your | Ye | es | | | | |
| dependents? | | | | | | |
| Part 2: Estimate | Your Ongoing | Monthly Expenses | | | | |
| Estimate your exper | nses as of your b | ankruptcy filing date unless y | ou are using this form as a sup plemental Schedule J, check th | | | } |
| | | cash government assistance it on Schedule I: Your Income | • | | Your | expenses |
| 4. The rental or hor any rent for the gr | | penses for your residence. Ind | clude first mortgage payments and | | 4. | \$300.00 |
| If not included i | in line 4: | | | | | |
| | 4a. Real estate taxes 4a \$0.00 | | | | | |
| 4b. Property, hom | neowner's, or rente | er's insurance | | | 4b. | \$0.00 |
| 4c. Home mainter | nance, repair, and u | upkeep expenses | | | 4c. | \$0.00 |
| 4d. Homeowner's | association or cor | ndominium dues | | | 4d. | \$0.00 |

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Debtor 1 Mitchell Essex Case number (if known) First Name Middle Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$0.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$50.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$161.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$25.00 10. Personal care products and services \$25.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$100.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$50.00 15d. Other insurance. Specify: ____ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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| Debtor 1 | Mitchell | | Essex | Case number (if known) | | |
|-------------------|-------------------------|--|------------------------------|------------------------|-----|----------|
| | First Name | Middle Name | Last Name | | | |
| 21.Other | Specify: | | | | 21 | \$0.00 |
| 22. Calc ı | ulate your monthly ex | penses. | | | | \$711.00 |
| 22a. <i>A</i> | Add lines 4 through 21. | | | | | \$0.00 |
| 22b. 0 | Copy line 22 (monthly e | expenses for Debtor 2), if any, fro | m Official Form 106J-2 | | | \$711.00 |
| 22c. A | ndd line 22a and 22b. T | he result is your monthly expens | ses. | | 22. | |
| 23.Calcu | late your monthly ne | et income. | | | | |
| 23a. C | Copy line 12 (your com | bined monthly income) from Sch | edule I. | | 23a | \$886.32 |
| 23b. C | Copy your monthly expe | enses from line 22 above. | | | 23b | \$711.00 |
| | | xpenses from your monthly incor | ne. | | | \$175.32 |
| | The result is your mont | thly net income. | | | 23c | |
| 24. Do y o | ou expect an increase | e or decrease in your expens | es within the year after you | u file this form? | | |
| | | t to finish paying for your car loar ase or decrease because of a n | | | | |
| 1 | No | | | | | |
| | /es | | | | | |
| | Explain here: | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Fill in this information to identify your case: | | | | |
|---|----------------|-------------|----------------------|--|
| Debtor 1 | Mitchell | | Essex | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing | ng) First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | |
| Case number (If known) | | | (State) | |

Official Form 106Dec

| Check if this is an |
|---------------------|
| amended filing |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t1: Sign Below | | | |
|-----|---|---|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | |
| | ☑ No | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | |
| | | | | |
| | | | | |
| | Under penalty of perjury, I declare that I have read the summary at that they are true and correct. | nd schedules filed with this declaration and | | |
| | · | | | |
| X | /s/ Mitchell Essex | x | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | |
| | Date 11/8/2016 | Date | | |
| | MM/DD/YYYY | MM/DD/YYYY | | |

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| Debtor 1 | Mitchell | | Essex |
|------------------------|---------------------------|-------------|----------------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filin | g) First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

Check if this is an amended filing

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part | 1: (| Give Details A | About You | r Marital Statu | s and Where You Live | ed Before | | | |
|------|----------|---------------------------|-----------------|------------------------|--|--------------|----------|----------|-----------------------------|
| 1. | Wh | at is your curre | nt marital st | atus? | | | | | |
| | ✓ | Married Not married | | | | | | | |
| 2. | Dui | ring the last 3 ye | ars, have yo | ou lived anywhere | other than where you live | now? | | | |
| | ✓ | No Yes. List all of th | e places you | lived in the last 3 ye | ears. Do not include where yo | ou live now. | | | |
| | | Debtor 1: | | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | | Number Street | | | From | Number Stree | t | | From |
| | | | | | To | | | То | |
| | | City | State | Zip Code | | City | State | Zip Code | |
| | | | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | | Number Street | | | From | Number Stree | t | | From |
| | | | | | To | | | | To |
| | | City | State | Zip Code | | City | State | Zip Code | |
| | territo | ories include Ariza No | ona, California | a, Idaho, Louisiana, | ouse or legal equivalent in Nevada, New Mexico, Puer btors (Official Form 106H). | | | | mmunity property states and |
| | | | | | | | | | |

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| Deb | tor 1 | Mitchell | | Essex | | numb | oer (if known) | |
|-----|-----------------------|--|---|-------------------------|--|--------|--|--|
| | | First Name Middle | | Last Name | е | | | |
| | | Explain the Sources of Your I | | | | | | |
| 4. | Fill i | you have any income from employment the total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details. | d from all jobs and all | l busines | ses, including part-time | | | ears? |
| | | | Debtor 1 | | | C | Debtor 2 | |
| | | | Sources of income Check all that apply. | | Gross income (before deductions and exclusions) | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | rom January 1 of current year until ne date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | | \$10300.00 | [| Wages, commissions, bonuses, tips Operating a business | |
| | | or last calendar year: January 1 to December 31, 2015) YYYY | ✓ Wages, commissions, bonuses, tips Operating a business | | \$12000.00 | | Wages, commissions, bonuses, tips Operating a business | |
| | | or the calendar year before that: January 1 to December 31, 2014) YYYY | ✓ Wages, commissions, bonuses, tips Operating a business | | \$12000.00 | | Wages, commissions, bonuses, tips Operating a business | |
| | Inclu bene case | you receive any other income during to de income regardless of whether that income fit payments; pensions; rental income; in a and you have income that you received to each source and the gross income from a No Yes. Fill in the details. | ome is taxable. Exam terest; dividends; mor ogether, list it only onc | iples of oney collected | ther income are alimony; on the from lawsuits; royaltied Debtor 1. | es; an | d gambling and lottery winn | |
| | | | Debtor 1 | | | | Debtor 2 | |
| | | | Sources of incom Describe below. | ne | Gross income from each source (before deductions and exclusions) | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | | From January 1 of current year until he date you filed for bankruptcy: | | | | | | |
| | | For last calendar year: January 1 to December 31, 2015) YYYY | | | | | | |
| | | For the calendar year before that: January 1 to December 31, 2014) YYYYY | | | | | | |

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| Debtor | | Mitchell First Name | | Middle Name | Essex Last Name | Case numb | per (if known) | |
|----------|----------|------------------------|-----------------|----------------------|-------------------------------|---|--------------------------------|--------------------------------|
| Part 3: | L | ist Certain | Payments | You Made Be | efore You Filed for I | Bankruptcy | | |
| 6. Are | e eit | ther Debtor 1' | s or Debtor | 2's debts primari | ly consumer debts? | | | |
| | No | | | ebtor 2 has prima | | Consumer debts are defined | in 11 U.S.C. § 101(8) as "incu | ırred by an individual |
| | | During the 9 | 00 days before | e you filed for bank | ruptcy, did you pay any cre | editor a total of \$6,425* or mo | ore? | |
| | | No. Go | to line 7. | | | | | |
| | | to | otal amount y | ou paid that credito | or. Do not include payment | or more in one or more pay ts for domestic support oblig an attorney for this bankrup | ations, such as | |
| | | * Subject to | adjustment o | n 4/01/19 and ever | y 3 years after that for case | es filed on or after the date o | f adjustment. | |
| ✓ | Ye | es. Debtor 1 o | r Debtor 2 o | r both have prim | arily consumer debts. | | | |
| | | During the 9 | 00 days before | e you filed for bank | ruptcy, did you pay any cre | editor a total of \$600 or more | ? | |
| | | ✓ No. Go | to line 7. | | | | | |
| | | tl | nat creditor. D | o not include payr | | more and the total amount y t obligations, such as child s s bankruptcy case. | | |
| | | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | C | reditor's Name |) | | | | | Mortgage |
| | N | lumber Street | | | | | | Car Credit card Loan repayment |
| | C | ity | State | Zip Code | | | | Suppliers or vendors |
| | _ | | | | | | | Other |
| | С | reditor's Name |) | | | | | Mortgage Car |
| | N | lumber Street | | | | | | Credit card |
| | _ | | | | | | | Loan repayment Suppliers or |
| | С | ity | State | Zip Code | | | | vendors Other |
| | <u>-</u> | reditor's Name | <u> </u> | | | | | Mortgage |
| | _ | | | | | | | Car |
| | N | lumber Street | | | | | | Credit card Loan repayment |
| | _ | | | | | | | Suppliers or |
| | C | tity | State | Zip Code | | | | vendors Other |

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| Debtor 1 | Mitchell | | Ess | sex | Case number (| if known) |
|----------------------|---|--|--|--|--|--|
| | First Name | Middle Name | Last | Name | | |
| Insid corp age | ders include your relati porations of which you nt, including one for a l h as child support and | business you operate as a | relatives of any g son in control, or | eneral partners; par owner of 20% or mo | tnerships of which y ore of their voting se | |
| ¥ | No | | | | | |
| Ш | Yes. List all payments | to an insider. | | | | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | |
| | Number Street | | | | | |
| | City Sta | te Zip Code | | | | |
| | Insider's Name | | | | | |
| | Number Street | | | | | |
| | City Sta | te Zip Code | | | | |
| | No | guaranteed or cosigned by that benefited an insider. | | | | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | | | | | | |
| | Insider's Name | | | | | |
| | Number Street | | | | | |
| _ | City Sta | te Zip Code | | | | |
| | Insider's Name | | | | | |
| | Number Street | | | | | |
| | 0:: | | | | | |
| | City Sta | te Zip Code | | | | |

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| Debto | or 1 | Mitchell | | | Essex | C | Case number (if | known) | |
|--------|---------------|--|--------------------|----------------|---------------------------------|------------------|-----------------|----------|-------------------------------------|
| | | First Name | Middl | e Name | Last Name | | | | |
| Part 4 | 1: | Identify Legal A | ctions, Repo | ssessions, | and Foreclosure | es | | | |
| Li | Vith ist a | in 1 year before you Il such matters, includ act disputes. | ı filed for bankrı | ıptcy, were yo | u a party in any laws | uit, court actio | | | ng? r custody modifications, and |
| | = | No Yes. Fill in the details. | | | | | | | |
| | | | | Natur | e of the case | Court or a | agency | | Status of the case |
| | | Case title | | | | | | | Pending |
| | | - | | _ | | Court Nam | ne | | On appeal |
| | | Case number | | _ | | NumberSt | reet | | Concluded |
| | | | | | | City | State | Zip Code | |
| | | Case title | | | | Oity | Otate | Zip Gode | Pending |
| | | | | _ | | Court Nam | ne | | On appeal |
| | | Case number | | | | NumberSt | reet | | Concluded |
| | | | | _ | | - | | | |
| | | | | | | City | State | Zip Code | |
| | ✓ | No. Go to line 11. Yes. Fill in the inform | nation below. | | Describe the prop | erty | | Date | Value of the property |
| | | Creditor's Name | | | | | | | |
| | | | | | Explain what happ | pened | | | |
| | | Number Street | | | Property was re | annesassad | | | |
| | | | | | Property was fo | • | | | |
| | | | | | Property was g | arnished. | | | |
| | | City | State Z | ip Code | Property was a | ttached, seized, | or levied. | | |
| | | | | | Describe the prop | erty | | Date | Value of the property |
| | | Creditor's Name | | | | | | | |
| | | | | | Explain what happ | pened | | | |
| | | Number Street | | | | | | | |
| | | | | | Property was re | | | | |
| | | | | | Property was for Property was g | | | | |
| | | City | State Z | ip Code | | ttached, seized, | or levied. | | |

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| Deb | tor 1 | Mitchell First Name | Middle Name | Essex Last Name | Case number (if known) | | |
|------|----------|--|--------------------------|-----------------------------|---------------------------------|--------------------------|---------------------|
| | | riistivaille | Middle Name | Last Name | | | |
| 11. | | hin 90 days before you filed ounts or refuse to make a p | | | ank or financial institution, s | et off any amou | nts from your |
| | | No Yes. Fill in the details. | | | | | |
| | | | | Describe the action the | e creditor took | Date action was taken | Amount |
| | | | | | | | |
| | | Creditor's Name | | | | | |
| | | Number Street | | | | | |
| | | | | Last 4 digits of account n | umber: XXXX- | | |
| | | City State | Zip Code | | | | |
| 12. | | hin 1 year before you filed f ointed receiver, a custodia | | of your property in the p | possession of an assignee for | or the benefit of | creditors, a court- |
| | ✓ | No | | | | | |
| | Ш | Yes | | | | | |
| Part | 5: | List Certain Gifts and | Contributions | | | | |
| 13. | Wi | ithin 2 years before you filed | d for bankruptcy, did yo | ou give any gifts with a to | otal value of more than \$600 | per person? | |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details for ea | | | | | |
| | | Gifts with a total value of per person | more than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | | | | | | |
| | | Person to Whom You Gave t | he Gift | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to you | | | | | |
| | | | | | | | |
| | | Person to Whom You Gave t | he Gift | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to you | | | | | |

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| | | Mitchell | | Essex | Case number (if known) | | |
|---------|-------------|---|--|---|-------------------------------|-----------------------------------|---------------------|
| | | First Name | Middle Name | Last Name | | | |
| 14. V | Nitk | hin 2 years before you filed for | r hankruntev did v | vou give any gifts or contribu | tions with a total value of | more than \$600 t | to any charity? |
| | | | bankiupicy, ala y | you give any gins or continua | dons with a total value of | more than \$000 | o arry criarity: |
| | ≅ | No | | | | | |
| L | _ | Yes. Fill in the details for each g | ift or contribution. | | | | |
| | | Gifts or contributions to cha | rities | Describe what you contri | buted | Date you | Value |
| | | that total more than \$600 | | | | contributed | |
| | | | | | | | |
| | | Charity's Name | | | | | |
| | | onany or tame | | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Only State | Zip Oodc | | | | |
| Part 6: | | List Certain Losses | | | | | |
| | am | nin 1 year before you filed for I abling? No Yes. Fill in the details. | oankruptcy or sind | ce you filed for bankruptcy, d | id you lose anything beca | use of theft, fire, | other disaster, or |
| _ | | Describe the property you lo | st and | Describe any insurance of | coverage for the loss | Date of your | Value of property |
| | | how the loss occurred | | Include the amount that insu | | loss | lost |
| | | | | pending insurance claims of | | | |
| | | | | A/B: Property. | | | |
| | | | | | | | |
| | 1 | | | | | | |
| | bοι | ut seeking bankruptcy or prep | aring a bankrupto | | | | nyone you consulted |
| | bou nclu | | aring a bankrupto | cy petition? | | | nyone you consulted |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No | aring a bankrupto | cy petition? | ervices required in your bank | Date payment or transfer | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. | aring a bankrupto | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm | aring a bankrupto | cy petition? credit counseling agencies for se Description and value of | ervices required in your bank | Date payment or transfer | Amount of |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | aring a bankrupto | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm | aring a bankrupto | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | aring a bankrupto | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | aring a bankrupto | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois | earing a bankrupto | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | earing a bankrupto | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State | earing a bankrupto | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois | earing a bankrupto | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address | aring a bankrupto tition preparers, or o 60643 Zip Code | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State | aring a bankrupto tition preparers, or o 60643 Zip Code | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | Let seeking bankruptcy or prepide any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment | aring a bankrupto tition preparers, or o 60643 Zip Code | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | ut seeking bankruptcy or prep de any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address | aring a bankrupto tition preparers, or o 60643 Zip Code | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | Let seeking bankruptcy or prepide any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment | aring a bankrupto tition preparers, or o 60643 Zip Code | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | Let seeking bankruptcy or prepide any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment | aring a bankrupto tition preparers, or o 60643 Zip Code | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | Let seeking bankruptcy or prepide any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment | aring a bankrupto tition preparers, or o 60643 Zip Code | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | Let seeking bankruptcy or prepide any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment Person Who Was Paid Number Street | 60643 Zip Code | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | Let seeking bankruptcy or prepide any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment | aring a bankrupto tition preparers, or o 60643 Zip Code | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | Let seeking bankruptcy or prepide any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment Person Who Was Paid Number Street City State | 60643 Zip Code | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |
| | bou nclu | Let seeking bankruptcy or prepide any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment Person Who Was Paid Number Street | 60643 Zip Code | ey petition? credit counseling agencies for se Description and value of transferred | ervices required in your bank | Date payment or transfer was made | Amount of payment |

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| Deb | tor 1 | Mitchell | | Essex | Case number (if known | n) | |
|-----|----------|--|--------------------------|---|-----------------------------|---|---------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | hin 1 year before you filed for you deal with your creditor not include any payment or trans. No Yes. Fill in the details. | rs or to make payments | s to your creditors? | our behalf pay or transfe | rany property to any | one who promised to |
| | | res. I ili ili the details. | | | | | |
| | | | | Description and value of transferred | any property | | Amount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | 0:4 | 7'- 0-1- | | | | |
| | | City State | Zip Code | | | | |
| | Inclu | ordinary course of your busude both outright transfers and sfers that you have already listed No Yes. Fill in the details. | d transfers made as secu | | security interest or mortga | ge on your property). | Do not include gifts and |
| | | | | Description and value of property transferred | | ny property or received or debts pa e | Date id transfer was made |
| | | Person Who Received Trans | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person Who Received Trans | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| 19. | | hin 10 years before you filed ese are often called asset-prot | | ou transfer any property to | a self-settled trust or sim | ilar device of which | you are a beneficiary? |
| | <u>~</u> | No | | | | | |
| | Ц | Yes. Fill in the details. | | Description and value o | f the property transferre | d | Date transfer was made |
| | | Name of trust | | | | | |

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| Debt | or 1 | Mitchell | Essex | Case number (if known) | |
|------|--------------|--|--|---|--|
| | | First Name Middle Name | Last Name | | |
| Part | 8: | List Certain Financial Accounts, I | nstruments, Safe Deposit Bo | xes, and Storage Units | |
| | mov Inclu | ved, or transferred? | financial accounts; certificates of depo | ruments held in your name, or for your benefit, closit; shares in banks, credit unions, brokerage houses, | |
| | | No Yes. Fill in the details. | | | |
| | | | Last 4 digits of account number | Type of account or instrument account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | | MB Financial Person Who Was Paid | XXXX-0000 | ✓ Checking 10/2016 Savings | \$ 30.00 |
| | | Number Street | - | Money market Brokerage Other | |
| | | City State Zip Code | | | |
| | | Person Who Was Paid | XXXX- | Checking Savings | |
| | | Number Street | | Money market Brokerage | |
| | | | | Other | |
| | | City State Zip Code | | | |
| 21. | | you now have, or did you have within 1 yea er valuables? No Yes. Fill in the details. | ar before you filed for bankruptcy, ar Who else had access to it? | ny safe deposit box or other depository for secur Describe the contents | Do you still have it? |
| | | Name of Financial Institution | Name | | ☐ No |
| | | Number Street | Number Street | | Yes |
| | | | City State Zip | Code | |
| | | City State Zip Code | _ | | |
| 22. | Hav | e you stored property in a storage unit or | place other than your home within 1 | I year before you filed for bankruptcy? | |
| | ✓ | No Yes. Fill in the details. | | | |
| | | | Who else had access to it? | Describe the contents | Do you still have it? |
| | | Name of Storage Facility | Name | | ☐ No ☐ Yes |
| | | Number Street | Number Street | | |
| | | 011 | City State Zip – | Code | |
| | | City State Zip Code | | | |

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| ebtor 1 | Mitchell | | Essex | Cas | se number (if known) | |
|----------|---|---|-------------------|---------------------|---|----------------|
| | First Name Middle Name | I | Last Name | | | |
| rt 9: | Identify Property You Hold or Conti | rol for Son | neone Else | | | |
| | | _ | | | | |
| | you hold or control any property that somed meone. | one else owns | s? Include any | property you b | oorrowed from, are storing for, or hold i | n trust for |
| | 1 | | | | | |
| <u> </u> | No | | | | | |
| <u> </u> | Yes. Fill in the details. | | | | | |
| | | Where is | the property? | | Describe the contents | Value |
| | Owner's Name | Number Sti | reet | | | |
| | | | | | | |
| | Number Street | - | | | | |
| | | | | | | |
| | | City | State | Zip Code | | |
| | City State Zip Code | | | | | |
| | Cive Details About Equipmental | l f a a t ! a | _ | | | |
| art 10 | Give Details About Environmental | mormatio | 11 | | | |
| or the | purpose of Part 10, the following definitions apply | <i>r</i> : | | | | |
| | Environmental law means any federal, state, or lo | ocal statute or r | egulation conc | erning pollution, c | contamination, releases of | |
| | hazardous or toxic substances, wastes, or materia | al into the air, la | and, soil, surfac | e water, groundw | vater, or other medium, | |
| | including statutes or regulations controlling the cl | eanup of these | e substances, v | vastes, or materia | al. | |
| • | Site means any location, facility, or property as def | fined under any | environmental | law, whether you | u now own, operate, or utilize it | |
| | or used to own, operate, or utilize it, including dis | sposal sites. | | | | |
| | Hazardous material means anything an environme | ental law define | es as a hazardo | ous waste, hazard | dous substance, | |
| | toxic substance, hazardous material, pollutant, co | ontaminant, or s | similar term. | | | |
| Report | all notices, releases, and proceedings that you kn | low about, rega | ardless of when | thev occurred. | | |
| | J , , , , , , , | | | , | | |
| I. Ha | s any governmental unit notified you that yo | u may be liab | le or potentia | lly liable under o | or in violation of an environmental law? | |
| | l No | | | | | |
| ř | Yes. Fill in the details. | | | | | |
| _ | Test i iii iii die detaile. | Governme | antal unit | | Environmental law, if you know it | Date of |
| | | COVERNING | ontar annt | | Environmentariaw, ii you know k | notice |
| | | | | | | |
| | Name of site | Governmer | ntal unit | | | |
| | Number Street | Number Str | reet | | | |
| | Number Succe | ramber en | 001 | | | |
| | | City | State | Zip Code | | |
| | | · | | · | | |
| | City State Zip Code | | | | | |
| На | ve you notified any governmental unit of any | release of ha | azardous mate | erial? | | |
| _ | | , | | | | |
| ¥ | No | | | | | |
| L | Yes. Fill in the details. | | | | | |
| | | Governme | ental unit | | Environmental law, if you know it | |
| | | | | | | Date of |
| | Name of site | Governmer | ntal unit | | | Date of notice |
| | | - | | | | |
| | | | | | | |
| | Number Street | Number Str | reet | | | |
| | Number Street | - | | | | |
| | Number Street | Number Str | reet | Zip Code | | |

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| Deb | tor 1 | Mitchell | | | Essex | Case | number (if known) | |
|-------|----------|------------------------|----------------|------------------------|-------------------------------|-----------------------|--|------------------|
| | | First Name | | Middle Name | Last Name | | | |
| | | | | | | | | |
| 26. | Hav | e you been a party | in any judic | ial or administra | tive proceeding under | any environmenta | al law? Include settlements and order | 'S. |
| | V | No | | | | | | |
| | Ħ | Yes. Fill in the deta | ile | | | | | |
| | Ш | res. Fill III the deta | 115. | | - | | | |
| | | | | (| Court or agency | | Nature of the case | Status of the |
| | | | | | | | | case |
| | | Case title | | | | | | Donding |
| | | | | | Court Name | | | Pending |
| | | | | ` | Jourt Name | | | On appeal |
| | | Case number | | | Number Street | | | |
| | | Case Harrisei | | | | | | Concluded |
| | | | | 7 | City State | Zip Code | | |
| | | | | , | oily State | Zip Code | | |
| Part | 11: | Give Details A | bout Your | Business or | Connections to An | v Business | | |
| T GIT | | Olvo Dotalio / | bout four | Buomicoo or | ooimootiono to Am | y Buomicoo | | |
| 27. | Wit | hin 4 vears hefore | you filed for | hankruntev did v | vou own a husiness or | have any of the fo | ollowing connections to any business | s? |
| 21. | WILL | illii 4 years belore | you med for | bankiupicy, did y | you own a business of | nave any or the n | bilowing connections to any business | 5 f |
| | | A sole propriet | or or self-emp | loved in a trade, p | rofession, or other activit | v. either full-time o | r part-time | |
| | | | | | | | part and | |
| | | | | y company (LLC) | or limited liability partners | snip (LLP) | | |
| | | A partner in a | | | | | | |
| | | An officer, dire | ctor, or manaç | ging executive of a | corporation | | | |
| | | An owner of at | least 5% of th | ne voting or equity | securities of a corporatio | n | | |
| | | _ | | | | | | |
| | ⊻ | No. None of the abo | | | | | | |
| | | Yes. Check all that a | apply above a | nd fill in the details | below for each business | | | |
| | | | | | Describe the natu | re of the busines | s Employer Identification r | number Do not |
| | | | | | | | include Social Security n | |
| | | | | | | | | |
| | | Business Name | | | - | | EIN: | |
| | | Dadinoco i tarrio | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | Number Street | | | Name of account | ant or bookkeepe | er | |
| | | | | | _ | <u> </u> | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | December the mate | | | |
| | | | | | Describe the natu | ire of the busines | s Employer Identification r include Social Security n | |
| | | | | | | | include Social Security II | uniber of frint. |
| | | | | | _ | | EIN: | |
| | | Business Name | | | | | | |
| | | | | | _ | | Datas husinasa suistad | |
| | | Number Street | | | Name of account | ant ar baaldraana | Dates business existed | |
| | | | | | Name of account | ant or bookkeepe | | |
| | | City | State | Zip Code | _ | | From To | |
| | | | | , | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | re of the busines | s Employer Identification r | number Do not |
| | | | | | | | include Social Security n | |
| | | | | | | | | |
| | | Business Name | | | _ | | EIN: | |
| | | _ 33330 1 14.110 | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | Mannoei Street | | | Name of account | ant or bookkeepe | | |
| | | | | | _ | | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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| Deb | tor 1 | Mitchell | | | Essex | Case number (if known) |
|------|------------|---|-----------------|---------------------|-------------------------------|---|
| | | First Name | | Middle Name | Last Name | |
| 28. | | nin 2 years before litors, or other pa | | bankruptcy, did yo | ou give a financial statemer | nt to anyone about your business? Include all financial institutions, |
| | | No Yes. Fill in the det | ails below. | | | |
| | | | | | Date issued | |
| | | Name | | | MM/DD/YYYY | |
| | | | | | | |
| | | Number Street | t | | _ | |
| | | City | State | Zip Code | _ . | |
| | | - City | State | Zip Code | | |
| Part | 12: | Sign Below | | | | |
| 1 | true a | and correct. I und ruptcy case can r | lerstand that r | naking a false stat | ement, concealing propert | nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | | / Mitchell Esse | | | × |
| | | Signa | ture of Debtor | 1 | | Signature of Debtor 2 |
| | | Date | 11/8/2016 | | | Date |
| ı | Did y | ou attach additio | nal pages to ' | our Statement of | Financial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)? |
| ı | V N | No | | | | |
| İ | Y | ⁄es | | | | |
| ı | Did y | ou pay or agree t | o pay someor | e who is not an at | torney to help you fill out b | ankruptcy forms? |
| | ✓ N | No | | | | |
| ĺ | Y | es. Name of person | on | | | Attach the Bankruptcy Petition Preparer's Notice, |

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B 203 (12/94)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| re | Mitchell Essex | Case No. | |
|----|---|---|--------------------------------|
| - | Debtor | | (If known) |
| | | Chapter | Chapter 13 |
| | DISCLOSURE OF COMPENSATION | ON OF ATTORNEY FO | R DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), that compensation paid to me within one year before the filin services rendered or to be rendered on behalf of the debtor(is as follows: | ng of the petition in bankruptcy, or a | greed to be paid to me, for |
| | For legal services, I have agreed to accept | | \$4,000.00 |
| | Prior to the filing of this statement I have received | | \$350.00 |
| | Balance Due | | \$3,650.00 |
| 2. | The source of the compensation paid to me was: | | |
| | Debtor Other (spec | ify) | |
| 3. | The source of the compensation paid to me is: | | |
| | Debtor Other (spec | ify) | |
| 4. | I have not agreed to share the above-disclosed compen members and associates of my law firm. | sation with any other person unless | they are |
| | I have agreed to share the above-disclosed compensation members or associates of my law firm. A copy of the a the people sharing in the compensation, is attached. | | |
| 5. | In return for the above-disclosed fee, I have agreed to rend a. Analysis of the debtor's financial situation, and rende bankruptcy; | - · · · · · · · · · · · · · · · · · · · | |
| | b. Preparation and filing of any petition, schedules, state | tements of affairs and plan which ma | ay be required; |
| | c. Representation of the debtor at the meeting of creditor | ors and confirmation hearing, and ar | ny adjourned hearings thereof; |
| | d. Representation of the debtor in adversary proceeding | gs and other contested bankruptcy r | matters; |
| 6. | By agreement with the debtor(s), the above-disclosed fee do | pes not include the following service | s: |
| | | | |
| | CERTIFI | CATION | |
| | I certify that the foregoing is a complete statement of any agnee debtor(s) in this bankruptcy proceedings. | reement or arrangement for paymer | nt to me for representation |
| | 11/8/2016 | /s/ Sean McNulty | |
| | Date | Signature of Attorney | _ |
| | | Semrad Law Firm | |
| | | Name of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| + | \$75 | administrative fee |
|---|-------|--------------------|
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Essex, Mitchell | Case No | Case No | | | | | |
|--------|--|-------------------------------------|-----------|--|--|--|--|--|
| | Debtor(s) | Chapter. | Chapter13 | | | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | | | |
| | The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge | | | | | | | |
| Date: | 11/8/2016 | /s/ Essex, Mitche | ·II | | | | | |
| | | Essex, Mitchell Signature of Deb | tor | | | | | |

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL 32256

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth , TX 76161

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN , NE 68508

AFNI, INC. PO Box 3517 Bloomington , IL 61702

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN , NE 68508

DISCOVER FIN SVCS LLC PO BOX 15316 WILMINGTON, DE 19850

FST PREMIER 3820 N LOUISE AVE SIOUX FALLS , SD 57107

CHASE CARD PO BOX 15298 WILMINGTON , DE 19850

USA Payday Loans 1541 N. LEWIS AVENUE Waukegan , IL 60085

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168

Illinois Tollway PO Box 5544 Chicago , IL 60680 City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602

PLS Financial 177 W. Lake St. Chicago , IL 60601

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| Debtor 1 Mitchell First Name | Ess Middle Name Last | ex Ca | ase number (if known) | |
|--|--|--|--|---|
| | | Name | | |
| Part 6: Answer These Qu | estions for Reporting Purposes 16a. Are your debts primarily co | onsumer debts? Consu | <i>ımer debts</i> are defined in | 11 U.S.C. § 101(8) as |
| you have? | "incurred by an individual pr No. Go to line 16b. Yes. Go to line 17. | imarily for a personal, fa | amily, or household purpo | ose." |
| Commence of management of the first of the f | 16b. Are your debts primarily but money for a business or inventional No. Go to line 16c. Yes. Go to line 17. | estment or through the o | operation of the business | s or investment. |
| | 16c. State the type of debts you o | owe that are not consun | ner debts or business deb | ors. |
| 17. Are you filing under Chapter 7? | No. I am not filing under Chapte | | | |
| Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available | Yes. I am filing under Chapter 7. expenses are paid that fund No. Yes. | Do you estimate that after is will be available to distri | any exempt property is exc ibute to unsecured creditors | cluded and administrative s? |
| for distribution to unsecured creditors? | | 1,000 mm 1,000 Mg | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49☐ 50-99☐ 100-199☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 50,0 | 001-50,000 001-100,000 re than 100,000 |
| 19. How much do you estimate your assets to be worth? | | \$1,000,001-\$10 \$10,000,001-\$5 \$50,000,001-\$1 \$100,000,001-\$ | 50 million | 0,000,001-\$1 billion 000,000,001-\$10 billion 0,000,000,001-\$50 billion re than \$50 billion |
| 20. How much do you estimate your liabilities to be? | | \$1,000,001-\$10 \$10,000,001-\$5 \$50,000,001-\$1 \$100,000,001-\$ | 50 million | 0,000,001-\$1 billion 000,000,001-\$10 billion ,000,000,001-\$50 billion e than \$50 billion |
| Part 7: Sign Below | | | | |
| For you | I have examined this petition, and I correct. If I have chosen to file under Chaptof title 11, United States Code. I usunder Chapter 7. | ter 7, I am aware that I m | nay proceed, if eligible, un | nder Chapter 7, 11,12, or 13 |
| If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to he out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | |
| | I request relief in accordance with the I understand making a false statem connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 151 | nent, concealing propert e can result in fines up to | y, or obtaining money or | property by fraud in |
| | /s/ Mitchell Essex Signature of Debtor 1 | in out , | Signature of Debtor 2 | |
| | Executed on 11/8/2016 MM / DD / Y | · | Executed on | I/DD/YYYY |

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| Debtor 1 | Mitchell | | Essex | |
|---------------------------------|--|--------------------------|---|--|
| D 05101 1 | First Name | Middle Name | Last Name | _ |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ |
| United States Ba | | Northern | District of Illinois | |
| Case number (Ifknown) | • | | (State) | _ _ |
| Official F | orm 106Dec | ······ | | Check if this is an amended filing |
| Declaration | on About an Ir | - าdividual Deb¹ | tor's Schedules | 12/15 |
| If two married pe | eople are filing together | , both are equally respo | nsible for supplying correct i | information. |
| money or proper | ty by fraud in connectio 341, 1519, and 3571. | | | ing a false statement, concealing property, or obtaining 250,000, or imprisonment for up to 20 years, or both. 18 |
| Did you pay | or agree to pay someo | ne who is NOT an attorn | ey to help you fill out bankru | uptcy forms? |
| ✓ No | | | | |
| Yes. Na | ame of person | | Attach Bankruptcy Pet Signature (Official Form | tition Preparer's Notice, Declaration, and m 119). |
| | | | | Annu Year |
| · | | | | |
| Under pena | alty of perjury, I declare 1 | hat I have read the sum | nmary and schedules filed wi | th this declaration and |
| | alty of perjury, I declare t re true and correct. | hat I have read the sum | nmary and schedules filed wi | th this declaration and |

Signature of Debtor 2

MM/DD/YYYY

Signature of Debtor 1

Date 11/8/2016 MM/DD/YYYY

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| Debtor 1 | Mitchell First Name | | Middle Name | Essex Last Name | Case number (if known) |
|----------------------------|--|-------------------------------|--------------------|---|--|
| and the territories of the | riist name | en andre estates and an anti- | wilddie Name | Last name | and the second s |
| | thin 2 years befo editors, or other | | bankruptcy, did y | ou give a financial state | ment to anyone about your business? Include all financial institutions, |
| V | No | | | | |
| L | Yes. Fill in the o | details below. | | | |
| | | | | Date issued | |
| | Name | | | MM/DD/YYYY | _ |
| | Number Stree | et | | | |
| | City | State | Zip Code | | |
| | _ | Oldio | Zip code | | |
| true | and correct. I ur nkruptcy case ca | nderstand that i | naking a false sta | atement, concealing prop | ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 |
| | Date | 11/8/2016 | | | Date |
| Did y | vou attach additi No Yes vou pay or agree No | onal pages to Y | | f Financial Affairs for Indi ttorney to help you fill ou | |
| | Yes. Name of pers | son | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Debtor(s) | Case No | |
|-----------------|-----------|---|-------------------------------------|
| | | Chapter. | Chapter13 |
| | VERIFIC | CATION OF CREDITOR MAT | RIX |
| T) knowledge | | y that the attached list of creditors is tr | ue and correct to the best of their |
| Date: | 11/8/2016 | /s/ Essex, Mitchel | T TOOL OF THE |

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| Debt | or 1 Mitchell | | Essex | Case number (if known) | |
|------|----------------------------------|--|---------------------------|--|--|
| | First Name | Middle Name | Last Name | | |
| 16. | Calculate the median | family income that applies to y | ou. Follow these step | IS: | Appendix and a few many production to the few many productions and the few many productions and the few many productions are the few many productions and the few many productions are the few many productions and the few many productions are the few many productions and the few many productions are the few many productions and the few many productions are the few many productions and the few many productions are the few many productions and the few many productions are the few many productions and the few many productions are the few many productions are the few many productions and the few many productions are the few many productions are the few many productions are the few many productions and the few many productions are the few |
| | 16a. Fill in the state in w | hich you live. | Illinois | - | |
| | 16b. Fill in the number of | of people in your household. | 1 | - | |
| | | amily income for your state and si | | | \$50,133.00 |
| | household using the link spec | ified in the separate instructions for | | d a list of applicable median income amounts, go online nay also be available at the bankruptcy clerk's office. | |
| 17. | How do the lines comp | pare? | | | |
| | | | | s form, check box 1, <i>Disposable income is not determined ion of Disposable Income</i> (Official Form 122C-2). | |
| | U.S.C. § 1325 | | Calculation of Dispo | eck box 2, Disposable income is determined under 11 sable Income (Official Form 122C-2). On line 39 of that | |
| Part | 3: Calculate Your C | ommitment Period Under | 11 U.S.C. §1325(k | o)(4) | |
| 18. | Copy your total averag | e monthly income from line 11 | | | \$1,032.90 |
| 19. | | | | is not filing with you, and you contend that calculating the your spouse's income, copy the amount from line 13. | |
| | 19a. If the marital adjust | ment does not apply, fill in 0 on li | ne 19a. | | -\$0.00 |
| | 19b. Subtract line 19a | from line 18. | | | \$1,032.90 |
| 20. | Calculate your current | monthly income for the year. F | ollow these steps: | | |
| | 20a. Copy line 19b. | | | | \$1,032.90 |
| | Multiply by 12 (the | number of months in a year). | | | x 12 |
| | 20b. The result is your c | urrent monthly income for the year | r for this part of the fo | om. | \$12,394.80 |
| | 20c. Copy the median fa | amily income for your state and si | ze of household from | line 16c. | \$50,133.00 |
| 21. | How do the lines comp | pare? | | | |
| | | n line 20c. Unless otherwise order is 3 years. Go to Part 4. | ed by the court, on th | ne top of page 1 of this form, check box 3, The | |
| | | an or equal to line 20c. Unless oth period is 5 years. Go to Part 4. | erwise ordered by the | e court, on the top of page 1 of this form, check box | |
| Part | 4: Sign Below | | | | |
| | By signing here I de | eclare under penalty of periury that | the information on th | his statement and in any attachments is true and correct. | |
| | by digiting thoro, i de | Age: | 1 | | |
| | /s/ Mitchell I | 1 0 0 0 | rly x | Signature of Debtor 2 | |
| | Signature of Del | 5101 1 | | olghature of Debtor 2 | |
| | Date 11/8/201 MM/DD/ | | | Date MM/DD/YYYY | |
| | | do NOT fill out or file Form 122C fill out Form 122C-2 and file it wi | | 39 of that form, copy your current monthly income from line | ∍ 14 |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor.* If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76

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- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| | 11/8/2016 |
|-----------|---------------|
| Signed: | millell asset |
| /s/ Mitch | ell Essex |
| | |
| Debtor(s) | |

/s/ Sean McNulty

Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.